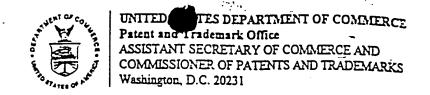
C:

	DATENT ADDITION TO THE PROPERTY OF THE PROPERT									Applicati n or Dock t Number					
L	PATENT APPLICATION FEE DETERMINATION REC									ORD 09187469					
CLAIMS AS FILED - PART I (Column 1)							SMA (Column 2) TYP			LL ENTITY PE OR		OTHER THAN SMALL ENTITY			
FOR			NUMBER FILED .			NUMBER EXTRA			RATE	FEE	7	RATE	FEE		
BASIC FEE										395.00	OR	7 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	790.00		
TOTAL CLAIMS			3 5 minus 20 =			*· / Si			x\$11=		OR	x\$22=			
INDEPENDENT CLAIMS			minus 3 =			• 3			x41=		OR	x82=			
MULTIPLE DEPENDENT CLAIM PRESENT							ří (╽	+135=		OR	+270=			
* If the difference in column 1 is less than zero, enter *0* in column 2								TOTAL		OR	TOTAL				
	B	(Colum	(00			RT II olumn 2)		SMAL	L ENTITY	OR		R THAN			
AMENDMENT A		CLAI REMAI AFT AMEND	NING ER		NL PRE	GHEST JMBER VIOUSLY ID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total	.31	<u> </u>	Minus	ئے "	35	=		x\$1\(\frac{1}{2}\)=		OR	x\$28=			
	Independent	1 (2		Minus	6	2	=		x41=		OR	x82=			
• • •	FIRST PRE	SENTATI	ON OF	MULTIPLE	DEPE	NDENT CL	AIM		+135=		OR	+270=			
		(Colum	n 1)		(Co	lumn 2)	(Column 3)	ΑĎ	TOTAL DIT. FEE		OR	TOTAL ADDIT. FEE			
AMENDMENT B		CLAII REMAII AFTI AMENDI	NING ER		NU PRE\	HEST MBER NOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total	•		Minus	••		=	;	x\$11=		OR	x\$22=	·		
	independent	•		Minus	***		=		x41=		OR	x82=			
	FIRST PRESENTATION OF MULTIPLE DEPEND					IDENT CLAIM			-135 =		OR	+270=			
		(Colum	<u> </u>		<u> </u>	lumn 2)	(Column 3)	ADI	TOTAL DIT. FEE		OR ,	TOTAL DDIT. FEE			
		CLAIN REMAIN AFTE AMENDA	IING R		NU PREV	HEST MBER NOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total	•		Minus'	** .		=	,	¢\$11=		OR	x\$22=			
	Independent	•		Minus	***		=		x41=		OR	x82=			
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						1	135=		OR	+270=				
th the entry in column 1 is less than the entry in column 2, write "0" in column 3. TOTAL TOTAL ADDIT. FEE The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.															



NOTICE OF FILING/CLAIM FEE(S) DUE TO ENSURE PROPER CREDIT OF FEES, PLEASE RETURN A COPY OF THIS FEE CALCULATION SHEET WITH YOUR RESPONSE.

APPLICATION	NUMBER:	·					
, ÷		Total Fe	e Calcula	ition			
	Fee Code	Total # Claims	Number Extra	x	Fee	Fee =	Total
	Sm./Lg.				Sm. Entity	Lg. Entity	
Basic Filing Fee	201/101					790	79
Total Claims >20	203/103	35 -20	= 15	x		22	33
Independent Claims >3	202/102	<u></u> 6 -3:	3_	x		82	244
Mult. Dep Claim Present	204/104					270	270
Surcharge	205/105					130	130
English Translation							
TOTAL FEE CALCUL	<u>ATION</u>						•
Fees due upon filing t	he application:						
Total Filing Fees Due	= \$	1766	· 				
Less Filing Fees Subn	nitted - \$ _						
BALANCE DUE	=\$_	1766	- -				

Office of Initial Patent Examination